CJA 20 APPOI	NIMENI OF AND AUTHORITY IN	OFAI COURT AIT			····	
1. CIR/DIST/DIV. CODE 2. PERSON REPRESENTED WOTULO, ERICK		VOUCHER NUMBER				
3. MAG. DKT/DEF. NUMBER 1:06-000020-001	4. DIST. DKT/DEF. NUMBER	5. APPEALS DK	T/DEF. NUMBER	6. OTHER DKT. N	IUMBER	
7. IN CASE/MATTER OF (Case Name)	8. PAYMENT CATEGORY	1	N REPRESENTED	10. REPRESENTA (See Instructions	TION TYPE	
U.S. v. WOTULO Other					xtradition Cases	
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense.						
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS Civille, G. Patrick CIVILLE AND TANG, PLLC		13. COURT ORDER X O Appointing Counsel F Subs For Federal Defender P Subs For Panel Attorney Y Standby Counsel				
330 HERNAN CORTEZ AVENUE		Prior Attorney's Name: Appointment Date:				
SUITE 200 HAGATNA GU 96910		X Because the above-named person represented has testified under oath or has				
(671) 472 0060		otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the				
l elephone Number: atto			attorney whose name appears in Item 12 is appointed to refresent this person in this case/			
14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per insulational)		Other (See Instructions)				
	Sexual and President Methods of By Order of the Court					
		Date of Order Nunc Pro Tunc Date				
			Repsyment or partial repsyment ordered from the person represented for this service at time of appointment. YES X NO			
time of appointment.						
CATEGORIES (Attach itemization of	serv Dinh (te CI	TOURS AMO	TAL MATH/TECH DUNT ADJUSTED IMED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW	
15. a. Arraignment and/or Plea						
b. Bail and Detention Hearings	DISTRICT COURT OF	MALIS				
c. Motion Hearings						
d Trial OCT 2.4.200s NM						
c e. Sentencing Hearings						
o f Revocation Hearings MARY I M MODANI						
g. Appeals Court CIEDY OF COLUMN						
h. Other (Specify on additional sheets)						
(Rate per hour = \$ 92.00) TOTALS:						
0 Louis Loui						
t c. Legal research and brief writing						
d. Travel time						
C e Investigative and Other work (Specify on additional sheets)						
T T						
(Rate per nour = \$ 92.00						
	ing, meals, mileage, etc.)					
18. Other Expenses (other than ex	pert, transcripts, etc.)					
	THE PERIOD OF STREET	20 45	PROVINCE TERMINATIO	N DATE 21 C	ASE DISPOSITION	
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE 20. FROM TO			FOTHER THAN CASE COMPLETION XX			
22. CLAIM STATUS Final Payment Interim Payment Number Supplemental Payment Payment Payment Number YES NO If yes, were you paid? YES NO If yes, were you paid? YES NO If yes, were you paid?						
Have you previously applied to the court for compensation annow remimbursement for unit sate: Other than from the court, have you, or to your knowledge has anyone else, received payment (compensation or anything or value) from any other source in connection with this representation? YES NO If yes, give details on additional sheets.						
I swear or affirm the truth or correctness of the above statements.						
Signature of Attorney:		D	hate:			
23. IN COURT COMP. 24. OUT OF COURT COMP. 25. TRAVEL EXPENSES 26. OTHER E				27. TOTAL	. AMT. APPR / CERT	
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER			DATE 28a JUDGE / MAG. JUDGE CODI			
29. IN COURT COMP. 30. OUT OF	COURT COMP. 31. TRAVE	32. OTHER EXPENSES 33. TOTAL AMT. APPROVED				
			DATE 34a. JUDGE CODE			
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.			DATE	34a. JUL	GE CODE	